

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Lynn Jenkins For Congress

ADDRESS (number and street)

PO Box 1441



Check if different than previously reported. (ACC)

Topeka

KS

66601-1441

2. FEC IDENTIFICATION NUMBER ▼

C C00433730

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

KS

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
11 / 04 / 2014

in the State of

KS

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
07 / 01 / 2014

through

M M / D D / Y Y Y Y  
07 / 16 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Heather Grote

Signature of Treasurer

Heather Grote

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
07 / 24 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Lynn Jenkins For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	44945	1803603.28
(b) Total Contribution Refunds (from Line 20(d)) .....	0	2650
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	44945	1800953.28
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	23672.14	518167.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	572.8
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	23672.14	517594.22
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1954114.86	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 29

Write or Type Committee Name

Lynn Jenkins For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

16075

705466.16

(ii) Unitemized.....

1370

35272

(iii) TOTAL of contributions from individuals ▶

17445

740738.16

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

27500

1062865.12

(d) The Candidate.....

0

0

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

44945

1803603.28

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0

0

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0

0

(b) All Other Loans.....

0

0

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0

0

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0

572.8

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0

4983.52

**16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

44945

1809159.6

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 29

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	23672.14	518167.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	150
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs) .....	0	2500
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	2650
21. OTHER DISBURSEMENTS .....	64000	209190
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	87672.14	730007.02

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1996842
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	44945
25. SUBTOTAL (add Line 23 and Line 24).....	2041787
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	87672.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1954114.86

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 29

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

Steve Huebert

A.

Mailing Address PO Box 849

City

Chanute

State

KS

Zip Code

66720-0849

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Aviation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		09		2014

Transaction ID : A-CF13104

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

Harvey Dean

B.

Mailing Address 1503 Bitner Court

City

Pittsburg

State

KS

Zip Code

66762-8782

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pitsco, Inc.Occupation  
CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		16		2014

Transaction ID : A-CF13126

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

Jan Allison

C.

Mailing Address 5825 SW 28th Street

City

Topeka

State

KS

Zip Code

66614-2418

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USD II 501Occupation  
Teacher

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1150

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : A-CF13005

Amount of Each Receipt this Period

100

SUBTOTAL of Receipts This Page (optional).....

600.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 29  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Lynn Jenkins For Congress**

Full Name (Last, First, Middle Initial) <b>Douglas Hofbauer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 01 / 2014
Mailing Address 1101 Crossgate Terrace		Transaction ID : A-CF13070
City Manhattan	State KS	
Zip Code 66503-9661		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer Frontier Farm Credit	Occupation President/ CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>Robert Kuehn</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 12 / 2014
Mailing Address 332 Valley Drive		Transaction ID : A-CF13105
City Lansing	State KS	
Zip Code 66043-1455		Amount of Each Receipt this Period 200
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650	

Full Name (Last, First, Middle Initial) <b>Max Nichols</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 15 / 2014
Mailing Address PO Box 701		Transaction ID : A-CF13140
City Great Bend	State KS	
Zip Code 67530-0701		Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		
Name of Employer JoMax Construction	Occupation Pipeline construction	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3050.00
<b>TOTAL</b> This Period (last page this line number only).....	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 29

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

Robert Hodgdon

Mailing Address 21405 W 73rd Terrace

City

Shawnee

State

KS

Zip Code

66218-9357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hodgden Powder

Occupation

Executive

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2014

Transaction ID : A-CF13139

Amount of Each Receipt this Period

2600

Full Name (Last, First, Middle Initial)

James R. Hutchinson

Mailing Address 10741 W 156th Terrace

City

Overland Park

State

KS

Zip Code

66221-6801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

United Office Products

Occupation

owner

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

275

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Transaction ID : A-CF13071

Amount of Each Receipt this Period

25

Full Name (Last, First, Middle Initial)

Tucker Shumack

Mailing Address 2346 S Nash Street

City

Arlington

State

VA

Zip Code

22202-1548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capitol Counsel LLC

Occupation

Principal

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2014

Transaction ID : A-CF13143

Amount of Each Receipt this Period

1500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4125.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 29

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

Doris K Spray

Mailing Address 4518 Quail Creek Drive

City

Great Bend

State

KS

Zip Code

67530-6832

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Venture Corp

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		09		2014

Transaction ID : A-CF13111

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Frank Novy

Mailing Address 3320 N Tyler Road

City

Wichita

State

KS

Zip Code

67205-8724

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Novy Oil &amp; Gas

Occupation

Oil &amp; gas broker/management

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : A-CF12988

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Joseph Sims

Mailing Address 5200 W 124th Terrace

City

Overland Park

State

KS

Zip Code

66209-3196

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sims &amp; Riley LLC

Occupation

CPA

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		02		2014

Transaction ID : A-CF13034

Amount of Each Receipt this Period

1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 29

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

Kyoung A Bonn

A.

Mailing Address 1403 Farnam Street

Apt. 306

City

Omaha

State

NE

Zip Code

68102-2237

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

merchant

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		16		2014

Transaction ID : A-CF13125

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Robert Moore

B.

Mailing Address 1441 Wakarusa Drive

Suite 200

City

Lawrence

State

KS

Zip Code

66049-3870

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self employed

Occupation

Real estate developer

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		10		2014

Transaction ID : A-CF13108

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Richard Rossman

C.

Mailing Address PO Box 582

City

Olathe

State

KS

Zip Code

66051-0582

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Crawford Sales, Inc.

Occupation

Owner

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

750

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : A-CF12989

Amount of Each Receipt this Period

100

SUBTOTAL of Receipts This Page (optional).....

1600.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 29

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

Adam Beren

A.

Mailing Address 1739 N Duckcross Cove

City

Wichita

State

KS

Zip Code

67206-3323

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Berexco, Inc

Occupation

Oil industry executive

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4600

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Transaction ID : A-CF13069

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Don Alexander

B.

Mailing Address 408 Miami Avenue

City

Kansas City

State

KS

Zip Code

66105-2116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Alexander &amp; Assoc

Occupation

Executive

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3750

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2014

Transaction ID : A-CF13095

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Sally Vastola

C.

Mailing Address 27 Collins Court

City

Getzville

State

NY

Zip Code

14068-1575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Nixon Peabody

Occupation

Strategic Policy Advisor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2014

Transaction ID : A-CF13134

Amount of Each Receipt this Period

1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 29

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

Vince Morris

A.

Mailing Address 2300 W 131st Street

City

Leawood

State

KS

Zip Code

66209-1900

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bukaty Companies

Occupation

President, Retirement Plan Services

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2014

Transaction ID : A-CF13132

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Jean Warren

B.

Mailing Address 2410 NW Grand Circle

City

Oklahoma City

State

OK

Zip Code

73116-4118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1150

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2014

Transaction ID : A-CF13076

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

John Milne

C.

Mailing Address 409 G Street SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

mCapitol Management

Occupation

Senior Vice President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2014

Transaction ID : A-CF13131

Amount of Each Receipt this Period

500

SUBTOTAL of Receipts This Page (optional).....

1600.00

TOTAL This Period (last page this line number only).....

16075.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 29

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Lynn Jenkins For Congress**

Full Name (Last, First, Middle Initial)

**TUESDAY GROUP POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address PO Box 11586

City

Washington

State

DC

Zip Code

20008-0786

FEC ID number of contributing  
federal political committee.

**C**

C00433060

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000

Date of Receipt

M M / D D / Y Y Y Y  
07 / 06 / 2014

**Transaction ID : A-CF13112**

Amount of Each Receipt this Period

2500

Full Name (Last, First, Middle Initial)

**NORTHWESTERN MUTUAL LIFE INSURANCE COMPANY FEDERAL PAC, THE**

**B.**

Mailing Address 720 E Wisconsin Avenue

City

Milwaukee

State

WI

Zip Code

53202-4703

FEC ID number of contributing  
federal political committee.

**C**

C00197095

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2014

**Transaction ID : A-CF13092**

Amount of Each Receipt this Period

2000

Full Name (Last, First, Middle Initial)

**Reynolds For Congress**

**C.**

Mailing Address PO Box 15388

City

Rochester

State

NY

Zip Code

14615-0388

FEC ID number of contributing  
federal political committee.

**C**

C00336065

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1000

Date of Receipt

M M / D D / Y Y Y Y  
07 / 16 / 2014

**Transaction ID : A-CF13133**

Amount of Each Receipt this Period

1000

**SUBTOTAL** of Receipts This Page (optional).....

5500.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 13 OF 29

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

Holland &amp; Knight Committee for Effective Gov

Mailing Address 2099 Pennsylvania Avenue NW

Suite 100

City

Washington

State

DC

Zip Code

20006-6801

 FEC ID number of contributing  
 federal political committee.

C C00171330

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2014

Transaction ID : A-CF13130

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Political Action Committee Of The American Association Of Orthopaedic Surgeons

Mailing Address 317 Massachusetts Avenue NE

Floor 1

City

Washington

State

DC

Zip Code

20002-5769

 FEC ID number of contributing  
 federal political committee.

C C00343137

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2014

Transaction ID : A-CF13089

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Holland &amp; Knight Committee for Effective Gov

Mailing Address 2099 Pennsylvania Avenue NW

Suite 100

City

Washington

State

DC

Zip Code

20006-6801

 FEC ID number of contributing  
 federal political committee.

C C00171330

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2014

Transaction ID : A-CF13129

Amount of Each Receipt this Period

1500

SUBTOTAL of Receipts This Page (optional).....

3500.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Lynn Jenkins For Congress**

Full Name (Last, First, Middle Initial)

WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 805 15th Street NW

Suite 430

City

Washington

State

DC

Zip Code

20005-2273

FEC ID number of contributing  
federal political committee.

**C** C00147173

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

6500

Date of Receipt

M M / D D / Y Y Y Y  
07 / 16 / 2014

**Transaction ID : A-CF13136**

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF HOME BUILDERS**

**B.**

Mailing Address 1201 15th Street NW

City

Washington

State

DC

Zip Code

20005-2842

FEC ID number of contributing  
federal political committee.

**C** C30001366

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7500

Date of Receipt

M M / D D / Y Y Y Y  
07 / 07 / 2014

**Transaction ID : A-CF13098**

Amount of Each Receipt this Period

5000

Full Name (Last, First, Middle Initial)

**3m Company Pac**

**C.**

Mailing Address 3M Center

Bldg. 224

City

Saint Paul

State

MN

Zip Code

55144-1001

FEC ID number of contributing  
federal political committee.

**C** C00084475

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2014

**Transaction ID : A-CF13088**

Amount of Each Receipt this Period

1000

**SUBTOTAL** of Receipts This Page (optional).....

6500.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 29

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Lynn Jenkins For Congress**

Full Name (Last, First, Middle Initial)

**Consumer Healthcare Products Association Pac (chpa/pac)**

Mailing Address 900 19th Street NW

Suite 700

City

Washington

State

DC

Zip Code

20006-2127

FEC ID number of contributing  
federal political committee.**C** C00040584

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2014

**Transaction ID : A-CF13141**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**WELLPOINT INC. WELLPAC**

Mailing Address 120 Monument Circle

City

Indianapolis

State

IN

Zip Code

46204-4906

FEC ID number of contributing  
federal political committee.**C** C00197228

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2014

**Transaction ID : A-CF13153**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**Fedexpac Federal Express Political Action Committee**

Mailing Address 942 S Shady Grove Road

City

Memphis

State

TN

Zip Code

38120-4117

FEC ID number of contributing  
federal political committee.**C** C00068692

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2014

**Transaction ID : A-CF13127**

Amount of Each Receipt this Period

3500

**SUBTOTAL** of Receipts This Page (optional).....

5500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Lynn Jenkins For Congress**

Full Name (Last, First, Middle Initial)

**American Airlines Political Action Committee**

Mailing Address 1101 17th Street NW

Suite 600

City

Washington

State

DC

Zip Code

20036-4718

FEC ID number of contributing  
federal political committee.

**C** C00107300

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2014

**Transaction ID : A-CF13090**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**B. American College Of Physician Services Inc Pac; Aka Acp Services Pac**

Mailing Address 25 Massachusetts Avenue NW

Suite 700

City

Washington

State

DC

Zip Code

20001-7401

FEC ID number of contributing  
federal political committee.

**C** C00403881

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2014

**Transaction ID : A-CF13156**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**C. WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 805 15th Street NW

Suite 430

City

Washington

State

DC

Zip Code

20005-2273

FEC ID number of contributing  
federal political committee.

**C** C00147173

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6500

Date of Receipt

M M / D D / Y Y Y Y  
07 / 16 / 2014

**Transaction ID : A-CF13135**

Amount of Each Receipt this Period

1500

**SUBTOTAL** of Receipts This Page (optional).....

3500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 29

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**Lynn Jenkins For Congress**

Full Name (Last, First, Middle Initial)

**General Aviation Manufacturers Association Political Action Committee**

Mailing Address 1400 K Street NW

Suite 801

City

Washington

State

DC

Zip Code

20005-2402

FEC ID number of contributing  
federal political committee.

**C** C00014878

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2014

**Transaction ID : A-CF13142**

Amount of Each Receipt this Period

2000

Full Name (Last, First, Middle Initial)

**General Electric Company Pac**

Mailing Address 1299 Pennsylvania Avenue NW

City

Washington

State

DC

Zip Code

20004-2400

FEC ID number of contributing  
federal political committee.

**C** C00024869

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7000

Date of Receipt

M M / D D / Y Y Y Y  
07 / 11 / 2014

**Transaction ID : A-CF13091**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**C.** Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

27500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 29

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

**A. Taylor Schettler**Mailing Address 1529 W 9th Street  
Apt. 2A

City Lawrence State KS Zip Code 66044-2468

Purpose of Disbursement  
reimbursement and mileage

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

246.5
-------

Transaction ID : B-E-13051

Original vendors exceeding reporting threshold itemized as memo transactions.

**B. Taylor Schettler**

Full Name (Last, First, Middle Initial)

Mailing Address 1529 W 9th Street  
Apt. 2A

City Lawrence State KS Zip Code 66044-2468

Purpose of Disbursement  
mileage

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

231.5
-------

Transaction ID : B-S-8440

[MEMO ITEM]

Subitemization of Taylor Schettler(07/07/14)

**c. Dublin Group**

Full Name (Last, First, Middle Initial)

Mailing Address 6800 W 107th Street  
Suite 100

City Overland Park State KS Zip Code 66212-1830

Purpose of Disbursement  
fundraising compensation

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

Amount of Each Disbursement this Period

2080
------

Transaction ID : B-E-13047

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2326.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 29

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

**A. Patrick Leopold**

Mailing Address 4824 Normandy Park Street

City	State	Zip Code
Lawrence	KS	66049-1840

Purpose of Disbursement  
Administrative/Salary/Overhead: expense

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2014

Amount of Each Disbursement this Period

46.29
-------

Transaction ID : B-E-13060

Original vendors exceeding reporting threshold itemized as memo transactions.

**B. Kansas Withholding Tax**

Mailing Address 915 SW Harrison Street

City	State	Zip Code
Topeka	KS	66612-1505

Purpose of Disbursement  
tax payment

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

Amount of Each Disbursement this Period

346.7
-------

Transaction ID : B-E-12976

**C. William Modesitt**

Mailing Address 412 Butterfield Road

City	State	Zip Code
Manhattan	KS	66502-6644

Purpose of Disbursement  
reimbursement and mileage

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

656.47
--------

Transaction ID : B-E-13057

Original vendors exceeding reporting threshold itemized as memo transactions.

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1049.46

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

**A. William Modesitt**

Mailing Address 412 Butterfield Road

City	State	Zip Code
Manhattan	KS	66502-6644

Purpose of Disbursement  
mileage

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

498
-----

Transaction ID : B-S-8450

**[MEMO ITEM]**

Subitemization of William Modesitt(07/07/14)

**B. Jimmy Caprio**Mailing Address 2600 W 6th St  
Apt. D-1

City	State	Zip Code
Lawrence	KS	66049

Purpose of Disbursement  
Travel: mileage

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

163
-----

Transaction ID : B-E-13055

**c. Paypal**

Mailing Address PO Box 45950

City	State	Zip Code
Omaha	NE	68145-0950

Purpose of Disbursement  
monthly service fee

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2014

Amount of Each Disbursement this Period

60
----

Transaction ID : B-E-12984

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

223.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 29

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

**A. United States Treasury**

Mailing Address Internal Revenue Serv

Date of Disbursement

M M	D D	Y Y Y Y
07	01	2014

City	State	Zip Code
Ogden	UT	84201-0005

Amount of Each Disbursement this Period

3032.97
---------

Purpose of Disbursement  
tax payment

001

Transaction ID : B-E-12975

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Jonathan E Trotter**

Mailing Address 1287 SWLane

Date of Disbursement

M M	D D	Y Y Y Y
07	07	2014

City	State	Zip Code
Topeka	KS	66604

Amount of Each Disbursement this Period

76.65
-------

Purpose of Disbursement  
Travel: mileage

002

Transaction ID : B-E-13054

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Margie Canfield**

Mailing Address 3644 SW York Way

Date of Disbursement

M M	D D	Y Y Y Y
07	10	2014

City	State	Zip Code
Topeka	KS	66604-2512

Amount of Each Disbursement this Period

51.09
-------

Purpose of Disbursement  
volunteer food reimbursement

001

Transaction ID : B-E-13059

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Original vendors exceeding reporting threshold itemized as memo transactions.

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3160.71

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

**A. Intrust Card Center**

Mailing Address PO Box 2121

City	State	Zip Code
Wichita	KS	67201-2121

Purpose of Disbursement  
credit card payment

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2014

Amount of Each Disbursement this Period

880.89
--------

Transaction ID : B-E-13062

Original vendors exceeding reporting threshold itemized as memo transactions.

**B. Eggtc**

Mailing Address 5107 Main Street

City	State	Zip Code
Kansas City	MO	64112-2742

Purpose of Disbursement  
food and beverage

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

454.16
--------

Transaction ID : B-S-8469

[MEMO ITEM]

Subitemization of Intrust Card Center(07/10/14)

**c. AAA Self Storage**

Mailing Address 2155 SW Westport Drive

City	State	Zip Code
Topeka	KS	66614-1928

Purpose of Disbursement  
storage

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

87
----

Transaction ID : B-S-8470

[MEMO ITEM]

Subitemization of Intrust Card Center(07/10/14)

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

880.89

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

**A. Office Max**

Mailing Address 2109 S.W. Fairlawn

City	State	Zip Code
Topeka	KS	66614

Purpose of Disbursement  
office supplies

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

89.57
-------

Transaction ID : B-S-8471

**[MEMO ITEM]**

Subitemization of Intrust Card Center(07/10/14)

**B. Ink Technologies.com**

Mailing Address 7600 McEwen Road

City	State	Zip Code
Dayton	OH	45459-3908

Purpose of Disbursement  
office supplies

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

Amount of Each Disbursement this Period

36.43
-------

Transaction ID : B-S-8476

**[MEMO ITEM]**

Subitemization of Intrust Card Center(07/10/14)

**c. Lynn Jenkins**

Mailing Address PO Box 1441

City	State	Zip Code
Topeka	KS	66601-1441

Purpose of Disbursement  
phone reimbursement

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

Amount of Each Disbursement this Period

100
-----

Transaction ID : B-E-12972

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

100.00
--------

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

**A. Elizabeth Dunn**

Mailing Address 803 New York Avenue

City	State	Zip Code
Holton	KS	66436-1745

Purpose of Disbursement  
Administrative/Salary/Overhead: mileage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

187
-----

Transaction ID : B-E-13052

**B. Lance Sweeney**

Mailing Address 9448 170th Street

City	State	Zip Code
Valley Falls	KS	66088-4242

Purpose of Disbursement  
reimbursement and mileage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

167.4
-------

Transaction ID : B-E-13056

Original vendors exceeding reporting threshold itemized as memo transactions.

**c. Lance Sweeney**

Mailing Address 9448 170th Street

City	State	Zip Code
Valley Falls	KS	66088-4242

Purpose of Disbursement  
mileage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2014

Amount of Each Disbursement this Period

162.4
-------

Transaction ID : B-S-8448

**[MEMO ITEM]**

Subitemization of Lance Sweeney(07/07/14)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

354.40



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

**A. GSL Solutions, Inc.**

Mailing Address 1411 N West Shore Boulevard

City	State	Zip Code
Tampa	FL	33607-4515

Purpose of Disbursement  
website hosting

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2014

Amount of Each Disbursement this Period

244.09
--------

Transaction ID : B-E-13048

**B. Intrust Card Center**

Mailing Address PO Box 2121

City	State	Zip Code
Wichita	KS	67201-2121

Purpose of Disbursement  
credit card payment

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2014

Amount of Each Disbursement this Period

9048.13
---------

Transaction ID : B-E-13061

Original vendors exceeding reporting threshold itemized as memo transactions.

**C. Del Friscos**

Mailing Address 1201 Pennsylvania Avenue NW

City	State	Zip Code
Washington	DC	20004-2401

Purpose of Disbursement  
food and beverage

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

Amount of Each Disbursement this Period

2009.36
---------

Transaction ID : B-S-8461

**[MEMO ITEM]**

Subitemization of Intrust Card Center(07/10/14)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9292.22

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

**A. Unwined**

Mailing Address 3690 King Street

Date of Disbursement

M M	D D	Y Y Y Y
05	28	2014

City	State	Zip Code
Alexandria	VA	22302-1921

Amount of Each Disbursement this Period

1572.03
---------

Purpose of Disbursement  
food and beverage

003

Transaction ID : B-S-8457

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

**[MEMO ITEM]**

Subitemization of Intrust Card Center(07/10/14)

State: District:

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 1st Street SE

Date of Disbursement

M M	D D	Y Y Y Y
06	16	2014

City	State	Zip Code
Washington	DC	20003-1801

Amount of Each Disbursement this Period

1667.86
---------

Purpose of Disbursement  
food and beverage

003

Transaction ID : B-S-8463

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

**[MEMO ITEM]**

Subitemization of Intrust Card Center(07/10/14)

State: District:

Full Name (Last, First, Middle Initial)

**C. Rosa Mexicano**

Mailing Address 575 7th Street NW

Date of Disbursement

M M	D D	Y Y Y Y
06	18	2014

City	State	Zip Code
Washington	DC	20004-1607

Amount of Each Disbursement this Period

1500.8
--------

Purpose of Disbursement  
food and beverage

003

Transaction ID : B-S-8467

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

**[MEMO ITEM]**

Subitemization of Intrust Card Center(07/10/14)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

**A. Ruth's Chris**

Mailing Address 724 9th Street NW

City	State	Zip Code
Washington	DC	20001-4505

Purpose of Disbursement  
food and beverage

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

Amount of Each Disbursement this Period

1999.51
---------

Transaction ID : B-S-8468

**[MEMO ITEM]**

Subitemization of Intrust Card Center(07/10/14)

**B. Customsignbanner**

Mailing Address 5512 Mitchelldale Street

City	State	Zip Code
Houston	TX	77092-7218

Purpose of Disbursement  
signs

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2014

Amount of Each Disbursement this Period

228.63
--------

Transaction ID : B-S-8462

**[MEMO ITEM]**

Subitemization of Intrust Card Center(07/10/14)

**C. Patrick Leopold**

Mailing Address 4824 Normandy Park Street

City	State	Zip Code
Lawrence	KS	66049-1840

Purpose of Disbursement  
phone reimbursement

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

Amount of Each Disbursement this Period

100
-----

Transaction ID : B-E-12971

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

100.00
--------

23535.44
----------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 29

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lynn Jenkins For Congress

Full Name (Last, First, Middle Initial)

**A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 1st Street SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

City	State	Zip Code
Washington	DC	20003-1838

Amount of Each Disbursement this Period

64000
-------

Purpose of Disbursement  
Political Contribution: contribution

011

Transaction ID : B-E-12974

Candidate Name  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEECategory/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

64000.00

64000.00